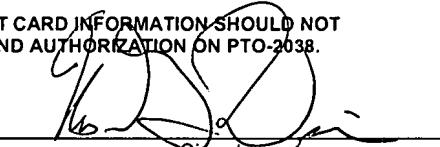
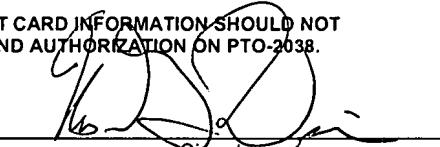
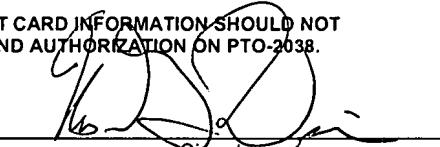
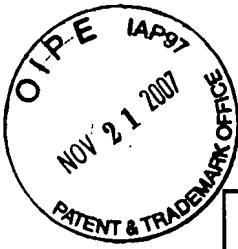


PTO/SB/31 (10-07)

Approved for use through 10/31/2007. OMB 0651-0031
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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NOTICE OF APPEAL FROM THE EXAMINER TO THE BOARD OF PATENT APPEALS AND INTERFERENCES		Docket Number (Optional) 31672-224619												
In re Application of Stamm et al.														
Application Number 10/665,519-Conf. #5826		Filed September 22, 2003												
For FENOFIBRATE COMPOSITIONS														
Art Unit 1615	Examiner H. N. Sheikh													
Applicant hereby appeals to the Board of Patent Appeals and Interferences from the last decision of the examiner.														
The fee for this Notice of Appeal is (37 CFR 41.20(b)(1))		\$ 510.00												
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is: \$ _____														
<input type="checkbox"/> A check in the amount of the fee is enclosed.														
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.														
<input checked="" type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account. I have enclosed a duplicate copy of this sheet.														
<input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No. 22-0261. I have enclosed a duplicate copy of this sheet.														
<input type="checkbox"/> A petition for an extension of time under 37 CFR 1.136(a) (PTO/SB/22) is enclosed.														
WARNING: INFORMATION ON THIS FORM MAY BECOME PUBLIC. CREDIT CARD INFORMATION SHOULD NOT BE INCLUDED ON THIS FORM. PROVIDE CREDIT CARD INFORMATION AND AUTHORIZATION ON PTO-2038.														
I am the <table> <tr> <td><input type="checkbox"/> applicant /inventor.</td> <td colspan="2"></td> </tr> <tr> <td><input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)</td> <td colspan="2">Signature Thomas G. Wiseman Typed or printed name</td> </tr> <tr> <td><input checked="" type="checkbox"/> attorney or agent of record.</td> <td colspan="2"> Registration number 35,046 (202) 344-4614 </td> </tr> <tr> <td><input type="checkbox"/> attorney or agent acting under 37 CFR 1.34.</td> <td colspan="2"> Telephone number Registration number if acting under 37 CFR 1.34. November 21, 2007 Date </td> </tr> </table>			<input type="checkbox"/> applicant /inventor.			<input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)	Signature Thomas G. Wiseman Typed or printed name		<input checked="" type="checkbox"/> attorney or agent of record.	Registration number 35,046 (202) 344-4614		<input type="checkbox"/> attorney or agent acting under 37 CFR 1.34.	Telephone number Registration number if acting under 37 CFR 1.34. November 21, 2007 Date	
<input type="checkbox"/> applicant /inventor.														
<input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)	Signature Thomas G. Wiseman Typed or printed name													
<input checked="" type="checkbox"/> attorney or agent of record.	Registration number 35,046 (202) 344-4614													
<input type="checkbox"/> attorney or agent acting under 37 CFR 1.34.	Telephone number Registration number if acting under 37 CFR 1.34. November 21, 2007 Date													
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.														
<input type="checkbox"/> *Total of 1 forms are submitted.														



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Effective on 12/08/2004.

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL

For FY 2008

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT	(\$)	510.00
		Attorney Docket No. 31672-224619

Complete if Known

Application Number	10/665,519-Conf. #5826
Filing Date	September 22, 2003
First Named Inventor	Andre Stamm
Examiner Name	H. N. Sheikh
Art Unit	1615

METHOD OF PAYMENT (check all that apply)

Check Credit Card Money Order None Other (please identify): _____
 Deposit Account Deposit Account Number: 22-0261 Deposit Account Name: Venable LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee
 Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 Credit any overpayments

FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	310	155	510	255	210	105	
Design	210	105	100	50	130	65	
Plant	210	105	310	155	160	80	
Reissue	310	155	510	255	620	310	
Provisional	210	105	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description

Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	210	105
Multiple dependent claims	370	185

<u>Total Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
- =	x	=	

<u>Multiple Dependent Claims</u>	
<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
- =	- =

HP = highest number of total claims paid for, if greater than 20.

<u>Indep. Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
- =	x	=	

HP = highest number of independent claims paid for, if greater than 3.

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

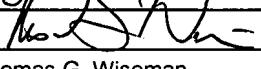
<u>Total Sheets</u>	<u>Extra Sheets</u>	<u>Number of each additional 50 or fraction thereof</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
- 100 =	/50 =	(round up to a whole number) x	=	

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): 1401 Notice of appeal 510.00

SUBMITTED BY

Signature		Registration No. (Attorney/Agent)	35,046	Telephone	(202) 344-4614
Name (Print/Type)	Thomas G. Wiseman			Date	November 21, 2007